

McQUAIDE LAW OFFICE
ATTORNEYS AT LAW

REX W. McQUAIDE

1405 Eisenhower Blvd., Richland Square I, Suite 200, Johnstown, Pennsylvania 15904
Telephone (814) 266-2070 E-mail: levmcq@twd.net
Fax (814) 266-5108

June 3, 1998

Pennsylvania Public Utility Commission
P.O. Box 3265
Harrisburg, PA 17105-3265

RE: Old Star Transport, Inc.

Dear Sir/Madam:

Enclosed herewith please find an Application for Transportation by Motor Common Carriers of Property with attachments and a check in the amount of \$100.00 for the filing fee in connection with the above referenced matter.

Very truly yours,


Rex W. McQuaide

RWM/ps
enclosure

cc: Old Star Transport

RECEIVED

JUL 7 1998

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

DOCUMENT
FOLDER

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BEFORE
PENNSYLVANIA PUBLIC UTILITY COMMISSION

APPLICATION FOR TRANSPORTATION BY MOTOR
COMMON CARRIERS OF PROPERTY

(PLEASE READ INSTRUCTIONS BEFORE PREPARING APPLICATION)

For PUC Use Only	70328	DOCKETED APPLICATION DOCKET	RECEIVED
Docket No.		JUL 15 1998	JUL 7 1998
Folder No.		ENTRY No. 12	

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

1. Old Star Transport, Inc.
(Full and correct name in which you intend to operate)

2. N/A
(Trade name, if any)

The trade name, if fictitious, N/A been registered
(has or has not)

Secretary of the Commonwealth on N/A (attach
date-stamped registration form).

3.	<u>111 Hipp Street</u>	<u>(814) 535-6370</u>
	(Physical Address)	(Telephone No.)
	<u>Johnstown</u>	<u>Pennsylvania 15902</u>
	(City) (County)	(State) (Zip)

4. N/A
(Mailing Address; if different)

	<u>N/A</u>	
	(City) (County)	(State) (Zip)

5.	<u>Rex W. McQuaide</u>	<u>(814) 266-2070</u>
	(Attorney's Name)	(Telephone Number)

1405 Eisenhower Blvd., Ste. 200, Johnstown, PA 15904

DOCUMENT
FOLDER

A-115126

6. Applicant not hold ICC authority under Docket
(does or does not) *Authority applied for*
No. _____

7. Applicant not have a current safety rating
(does or does not)
issued by _____

(attach copy)

8. Approximate number of commercial vehicles to be operated

intrastate: owned 1 leased _____

9. Applicant is (check one):

Individual

Partnership. Attach copy of partnership agreement and list names and addresses of all partners below (use additional sheet if necessary).

(Name)	(Address)

Corporation. Organized under the laws of the State of Pennsylvania
and qualified to do business in Pennsylvania by registering
with the Secretary of the Commonwealth on Pennsylvania
(Attach date-stamped copy of application for Certificate of
Incorporation or Authority). Include as an attachment a list
of corporate officers and their titles and the names,
addresses and numbers of shares held by each stockholder.

10. Attach the following, as appropriate (check those attached):

Partnership Agreement.

Date-stamped copy of Fictitious Trade Name registration certificate.

Date-stamped copy of Application for Certificate of Incorporation or Certificate of Authority.

Copy of current safety rating issued by a state or federal agency.

List of corporate officers and stockholders and distribution of shares.

Proof of insurance.

11. Certification

a. Applicant certifies that it is not now engaged in any intrastate transportation of property for compensation between points in Pennsylvania and will not engage in the transportation for which approval is herein sought unless and until authorization for such transportation is received.

b. Applicant certifies that it understands the requirements of the Pennsylvania Public Utility Commission, especially as they relate to safety and insurance may result in civil penalties, suspension or cancellation of the certificate.

c. Applicant certifies that it understands that it is subject to an annual assessment based upon its gross intrastate operating revenue to help pay expenses incurred by the PUC in regulating motor common carriers of property; and acknowledges that failure to file the annual assessment report and timely satisfy the assessment may result in civil penalties, suspension or cancellation of the certificate.

VERIFICATION OF APPLICATION

I/We hereby state that the statements made in the application are true and correct to the best of my/our knowledge, information belief.

The undersigned understand(s) that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

Old STAR Transport, Inc.

By:

William F. Barkley

(Print Name)

(Signature)

William F. Barkley, Pres. 6-3-98

(Date)

(Print Name)

(Signature)

(Date)

(Print Name)

(Signature)

(Date)

This section must be completed by the applicant appearing on Line 1, if an individual; by all partners, if a partnership; or by the President or Secretary if a corporation.

Old Star Transport, Inc.
Shareholder List

William F. Barkley -----100% outstanding shares
President/Secretary
111 Hipp Street
Johnstown, PA 15902

Microfilm Number _____
Entity Number 2810946

Filed with the Department of State on APR 13 1998
[Signature]
Secretary of the Commonwealth

ARTICLES OF INCORPORATION

Indicate type of domestic corporation (check one):

- Business-stock (15 Pa. C.S. Section 1306) _____ Professional (15 Pa.C.S. Section 2903)
- _____ Business-nonstock (15 Pa. C.S. Section 2102) _____ Management (15 Pa. C.S. Section 2701)
- _____ Business-statutory close (15 Pa. C.S. Section 2304a is applicable) _____ Cooperative (15 Pa. C.S. Section 7701)

1. The name of the corporation is: Old Star Transport, Inc.

This corporation is incorporated under the provisions of the Business Corporation Law of 1988.

2. The (a) address of this corporation's initial registered office in this Commonwealth or (b) commercial registered office provider and the county of venue is:

(a)	<u>111 Hipp Street</u>	<u>Johnstown</u>	<u>PA</u>	<u>15902</u>	<u>Cambria</u>
	Number and Street	City	State	Zip Code	County

(b) _____
Name of Commercial Registered Office Provider

3. The aggregate number of shares authorized is: 1000 (other provisions, if any attach 8 1/2 x 11 sheet). The Board of Directors shall have the full authority permitted by law to divide the authorized and unissued shares into classes or series, or both, and to determine for any such class or series its designations and the number of shares of the class or series and the voting rights, preferences, limitations and special rights, if any, of the shares of the class or series.

4. The name and address, including street and number, if any, of each incorporator is:

Name	Address
<u>Rex W. McQuaide</u>	<u>1405 Eisenhower Blvd. Johnstown, PA 15904</u>

5. The specified effective date, if any, is upon filing of Articles.

6. These articles of incorporation may be amended in the manner prescribed at the time by statute, and all rights conferred upon shareholders in these articles of incorporation are granted subject to this reservation.

DATED: 4/8/98

INCORPORATOR:
BY: [Signature]
Rex W. McQuaide

CERTIFICATE OF INSURANCE

PRODUCER
INTERSTATE INSURANCE MANAGEMENT, IN
2307 MENOHER BLVD.
JOHNSTOWN, PA 15905

ANN

INSURED
OLD STAR TRANSPORT, INC.
111 HIPPI STREET
JOHNSTOWN, PA 15902

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY LETTER	A	EMPIRE FIRE & MARINE INSURANCE COMPANY
COMPANY LETTER	B	CANAL INSURANCE COMPANY
COMPANY LETTER	C	
COMPANY LETTER	D	
COMPANY LETTER	E	

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM, OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS	
	GENERAL LIABILITY				GENERAL AGGREGATE \$	
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMPOPS AGGREGATE \$	
	<input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCURRENCE				PERSONAL & ADVERTISING INJURY \$	
	<input type="checkbox"/> OWNER'S & CONTRACTORS PROTECTIVE				EACH OCCURRENCE \$	
					FIRE DAMAGE (ANY ONE FIRE) \$	
					MEDICAL EXPENSE (ANY ONE PERSON) \$	
A	AUTOMOBILE LIABILITY	CLS35663	06/09/98	06/09/99	CSL	\$ 1,000,
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (PER PERSON)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (PER ACCIDENT)	\$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON-OWNED AUTOS					
	<input type="checkbox"/> GARAGE LIABILITY					
	EXCESS LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				AGGREGATE	\$
	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY	
					\$	(EACH ACCIDENT)
					\$	(DISEASE-POLICY LIMIT)
					\$	(DISEASE-EACH EMPLOYEE)
B	OTHER	MTC028803	06/09/98	06/09/99		50,000
	MOTOR CARGO					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS

1980 WESTERN STAR TRACTOR, SER.#KPNCPH1903673

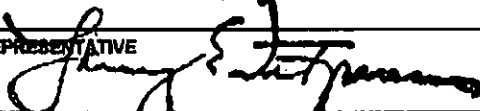
CERTIFICATE OF HOLDER

PA PUBLIC UTILITIES COMMISSION
P.O. BOX 3265
HARRISBURG, PA 17105

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE





COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA 17105-3265

IN REPLY PLEASE
REFER TO OUR FILE

July 23, 1998

▪ REX W MCQUAIDE
ATTORNEY AT LAW
1405 EISENHOWER BLVD SUITE 200
JOHNSTOWN PA 15904

▪ In Re: A-00115126 - OLD STAR TRANSPORT, INC.

Dear Sir:

The above-cited application has been received and accepted for publication. It will be published in the Pennsylvania Bulletin of August 1, 1998.

You are further advised that the above-cited application will be submitted for review provided no comments are filed on or before August 17, 1998.

If comments are filed you will be advised as to the procedure.

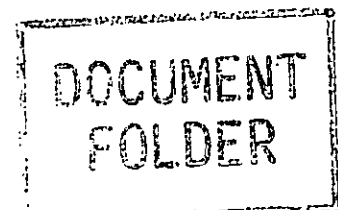
You are not now authorized to provide intrastate service. You will receive notification as to when you may begin providing service.

Very truly yours,

Peter S. Marzolf, Supervisor
Technical Unit - Compliance Office
Bureau of Transportation and Safety

PSM:tz

cc: Document Folder
Old Star Transport, Inc.
111 Hipp Street
Johnstown, PA 15902



PENNSYLVANIA PUBLIC UTILITY COMMISSION

RECEIPT

The addressee named here has paid the PA P.U.C. for the following bill:

REX W MCQUAIDE ESQ
1405 EISENHOWER BLVD - STE 200
JOHNSTOWN PA 15904

DATE 8/18/98
RECEIPT # 194747

IN RE: Application fees for OLD STAR TRANSPORT INC
Docket Number A-00115126..... \$100.00

REVENUE ACCOUNT: 001780-017601-102

CHECK NUMBER: 6979
CHECK AMOUNT: \$100.00

C. Joseph Meisinger
(for Department of Revenue)

DOCUMENT
FOLDER

DOCKETED
AUG 20 1998

004811

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SECRETARY'S BUREAU

98 AUG 20 10:08